

T-27-06

110

	TRANSMITTAL LETTER (General - Patent Pending)			Docket No. 8703-510		
In Re Application Of GARY W. PACE, ET AL.						
Application No.	Filing Date	Examiner	Customer No.	Group Art Unit	Confirmation No.	
10/661,458	September 10, 2003		61834		7151	
Title: METHODS AND COMPOSITIONS FOR REDUCING THE RISK ASSOCIATED WITH THE ADMINISTRATION OF OPIOID ANALGESICS IN PATIENTS WITH DIAGNOSED OR UNDIAGNOSED RESPIRATORY ILLNESS						
<u>COMMISSIONER FOR PATENTS:</u>						
Transmitted herewith is: Power of Attorney and Correspondence Address Indication Form (PTO/SB/81) Certificate of Transmittal By Express Mail						
 in the above identified application.						
<p> <input checked="" type="checkbox"/> No additional fee is required. <input type="checkbox"/> A check in the amount of _____ is attached. <input checked="" type="checkbox"/> The Director is hereby authorized to charge and credit Deposit Account No. _____ as described below. </p> <p> <input type="checkbox"/> Charge the amount of _____ <input type="checkbox"/> Credit any overpayment. <input checked="" type="checkbox"/> Charge any additional fee required. </p> <p> <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. </p>						
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.						
 <i>Signature</i>				Dated: July 26, 2006		
DANIEL F. COUGHLIN (Reg. No. 36,111) DREIER LLP 499 Park Avenue New York, NY 10022 U.S.A.						
 cc:						



Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE & TRAVEL

**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/661,458
Filing Date	September 10, 2003
First Named Inventor	PACE
Title	Methods and Compositions for . . .
Art Unit	
Examiner Name	To Be Assigned
Attorney Docket Number	8703-510 (formerly 28142-501 UTIL)

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

 Practitioners associated with the Customer Number:

61834

OR

 Practitioner(s) named below:

Name	Registration Number
DANIEL F. COUGHLIN	36,111

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

The address associated with the above-mentioned Customer Number:

OR

The address associated with Customer Number:

OR

61834

<input type="checkbox"/>	Firm or Individual Name	DANIEL F. COUGHLIN
--------------------------	-------------------------	--------------------

Address	DREIER LLP
---------	------------

499 PARK AVENUE

City	NEW YORK
------	----------

State	NEW YORK
-------	----------

Zip	10022
-----	-------

Country	U.S.A.
---------	--------

Telephone	212-328-6100
-----------	--------------

Email	DCOUGHLIN@DREIERLLP.COM
-------	-------------------------

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Gary Pace</i>	Date	9 May 06
Name	GARY W. PACE	Telephone	7817560440
Title and Company	<i>CEO / ORx Pharma</i>		

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

*Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

JUL 26 2006

Approved for use through 12/31/2008. OMB 0651-0035
 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/81 (01-06)

**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/661,458
Filing Date	September 10, 2003
First Named Inventor	PACE
Title	Methods and Compositions for . . .
Art Unit	
Examiner Name	To Be Assigned
Attorney Docket Number	8703-510 (formerly 28142-501 UTIL)

I hereby revoke all previous powers of attorney given in the above-identified application.

I hereby appoint:

Practitioners associated with the Customer Number:

61834

OR

Practitioner(s) named below:

Name	Registration Number
DANIEL F. COUGHLIN	36,111

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

Please recognize or change the correspondence address for the above-identified application to:

The address associated with the above-mentioned Customer Number:

OR

The address associated with Customer Number:

OR

<input checked="" type="checkbox"/> Firm or Individual Name	DANIEL F. COUGHLIN		
Address	DREIER LLP 499 PARK AVENUE		
City	NEW YORK	State	NEW YORK
Country	U.S.A.		
Telephone	212-328-6100	Email	DCOUGHLIN@DREIERLLP.COM

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
 Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Signature	Maree T. Smith	Date	24/3/06
Name	MAREE T. SMITH	Telephone	617-33652554
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

Total of 2 forms are submitted.

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10)Applicant(s): **GARY W. PACE, ET AL.**

Docket No.

8703-510Application No.
10/661,458Filing Date
September 10, 2003

JUL 26 2006 Examiner

Customer No.
61834

Group Art Unit

Invention: **METHODS AND COMPOSITIONS FOR REDUCING THE RISK ASSOCIATED WITH THE ADMINISTRATION OF OPIOID ANALGESICS IN PATIENTS WITH DIAGNOSED OR UNDIAGNOSED RESPIRATORY ILLNESS**

I hereby certify that the following correspondence:

**Transmittal
Power of Attorney and Correspondence Address Change Indication Form***(Identify type of correspondence)*

is being deposited with the United States Postal Service "Express Mail Post Office to Addressee" service under 37 CFR 1.10 in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on

July 26, 2006*(Date)***Daniel F. Coughlin***(Typed or Printed Name of Person Mailing Correspondence)*
*(Signature of Person Mailing Correspondence)***EV 390990009 US***("Express Mail" Mailing Label Number)***Note: Each paper must have its own certificate of mailing.**